

**THE UNIVERSITY OF THE STATE OF NEW YORK
The State Education Department**

**Office of Management Services
State Aided Programs**

**507 West Hall, Education Building
Albany, New York 12234**

**2023-24
STATE AID YEAR**

Supervisory
District No. _____

County of _____

**ANNUAL FINANCIAL AND STATISTICAL REPORT
OF
THE BOARD OF COOPERATIVE EDUCATIONAL SERVICES**

For the School Year Ending June 30, 2023

Filing Instructions: One copy of this report should be filed with the Education Department by the District Superintendent. Copies also should be filed with the clerk and the executive officer of the Board of Cooperative Educational Services.

Please list the names of the officers of the Cooperative Board for the school year 2022-23.

President _____ Address _____

*Treasurer _____ Address _____

Clerk _____ Address _____

AFFIDAVIT OF TREASURER OF BOARD OF COOPERATIVE EDUCATIONAL SERVICES

State of New York

County of _____ SS

_____ being duly sworn, deposes and says that (s)he is Treasurer of the Board of Cooperative Educational Services for which the foregoing report is made, that said report has been prepared in accordance with the instructions of the New York State Education Department, that the statements therein (s)he believes to be in all respects true, and that an exact copy of this report has been filed with the official records of the Board.

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Date _____

Treasurer, Board of Cooperative
Educational Services